



THOMAS L. GARTHWAITE, M.D.
Director and Chief Medical Officer

FRED LEAF
Chief Operating Officer

COUNTY OF LOS ANGELES
DEPARTMENT OF HEALTH SERVICES
313 N. Figueroa, Los Angeles, CA 90012
(213) 240-8101

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February 25, 2003

TO: Each Supervisor

FROM: Thomas L. Garthwaite, M.D.
Director and Chief Medical Officer

Jonathan E. Fielding, M.D., M.P.H.
Director of Public Health and Health Officer

SUBJECT: **SMALLPOX VACCINATION PROGRAM**

On February 18, 2003 the Los Angeles County Board of Supervisors instructed the Department of Health Services (DHS) to report on the status of the Smallpox Vaccination Program and to develop a plan to ensure maximum utilization of the smallpox vaccine. This is to update you on our current progress and next steps in implementing the vaccination program.

Background

On December 13, 2002 President Bush announced the initiation of a three-phase national smallpox vaccination program. Phase I of the voluntary program will vaccinate public health and hospital-based emergency response teams to be prepared to treat and control the spread of smallpox should it be used as a weapon of mass destruction. On December 9, 2002 DHS submitted a plan to the CDC and requested vaccine doses sufficient to vaccinate public health workers, vaccinators and designated emergency medical staff in the 81 9-1-1 hospitals and two Veterans Administration hospitals as well as designated staff at the Long Beach and Pasadena health departments. Our plan estimated that we would need approximately 9,200 doses of vaccine to implement Phase I. This figure was based on the CDC guidance that included provisions to vaccinate up to 100 persons per hospital to provide around the clock care for smallpox cases. On January 22, 2003 Los Angeles County received 9,000 doses of smallpox vaccine. On January 24, 2003 the Secretary of Health and Human Services issued a declaration invoking Section 304 of the Homeland Security Act providing limited liability protection for state and local health departments conducting vaccinations.

Initial Challenges

Initial challenges in implementing the vaccination program have included

Extensive pre-screening for contraindications: The CDC issued several contraindications for receiving the vaccine including a wide range of skin conditions, immune disorders and corresponding household member contraindications. This has resulted in 30 to 50 percent of those willing to be vaccinated being screened out due to medical contraindications.

Legal and administrative issues: The small but real possibility of serious adverse reactions to the vaccine has generated significant concerns regarding liability. These concerns range from who will pay for employee time off should the vaccinee experience a strong reaction to the vaccine, to compensation for the damages of household members, or patients experiencing complications should they contract the virus used in the vaccine. Although the federal government has addressed some of these concerns as a part of the Homeland Security Act, individual hospitals must work through these issues with their administrative and legal departments.

Controversy regarding the national vaccination program: The lack of disclosure of definitive information regarding the risk of the intentional release of smallpox, as well as other concerns has generated significant controversy regarding the need to initiate vaccinations. Both the American Nurses and California Nurses Associations have issued statements opposing the vaccination of health workers at this time. The Service Employees International Union (SEIU) also expressed significant concern regarding the vaccination program with particular emphasis on the adequacy of health care worker protection. We believe the on-going debate may have reduced numbers of persons willing to volunteer for vaccine.

Expiration of vaccine: When Los Angeles County received the vaccine the vials carried an expiration date of May 31, 2003. The short lifespan of the vaccine combined with restrictions on its use (e.g., only able to vaccinate public health and hospital-based response teams, administration by DHS staff only) present significant challenges. Although we were prepared to vaccinate large numbers of staff in a short period of time the lower than expected number of persons volunteering have increased the focus on the expiration of the vaccine.

Current Status

Public Health Response Teams: To date, 38 public health staff persons (both vaccinators and public health response teams members) have been vaccinated. Information for pre-screening has been sent to public health staff in selected categories (nurses, epidemiologist, etc.) to facilitate screening should they opt to volunteer to be vaccinated. The City of Long Beach Health Department will begin vaccinating its vaccinators next week. The Pasadena Health Department has vaccinated two vaccinators (included in the Los Angeles County total).

Hospital Based Response Teams: On January 9, 2003 an orientation meeting was held for hospital administrators. The meeting was attended by 196 persons representing 62 of the 83 hospitals included in the Phase I plan. Four regional meetings for hospital employees were held and attended by staff from 59 of the 83 hospitals identified to participate in the Phase I program. In addition, 14 meetings and/or presentations on the smallpox vaccine were conducted at individual hospitals. Pre-screening packages were sent to hospitals along with a request for numbers of individuals they would like vaccinated. The four DHS hospitals included in the plan (LAC+USC, Harbor/UCLA, MLK/Drew and Olive View/UCLA) are in the process of identifying volunteers. As of Monday, February 24, 2003:

- 13 hospitals had indicated they would not participate in the program at this time
- 55 hospitals were undecided or were in the process of recruiting volunteers
- 15 hospitals had identified 342 volunteers for their response teams volunteering

Vaccination dates (starting February 25 through March 18) have been scheduled for 8 of the 15 hospitals that have identified volunteers.

In addition to these groups DHS ambulance service personnel were provided with initial information regarding vaccination and 12 individuals have volunteered. Vaccination was also offered to the DHS Disaster Medical Assistance Teams (DMAT) and 16 team members have volunteered.

Plans to Maximize Use of the Vaccine

Plans are underway to maximize the use of the vaccine prior to the May 31, 2003 expiration date. We initially inquired about transferring some of Los Angeles County's vaccine to the California Department of Health Services, which had requested but not received their 10,000 doses. However, the CDC informed us verbally that we could not transfer the vaccine to another jurisdiction and since that time the requested vaccine has been shipped by the Los Angeles County to the California DHS. On February 20, 2003 we requested in writing permission to transfer some of our smallpox vaccine to other jurisdictions. Other activities to maximize use of the vaccine include:

The Phase I guidelines restrict use of the vaccine to only a few groups of public health and hospital-based medical response teams. Our smallpox plan included a small number of other emergency response and law enforcement staff to provide sufficient coverage in the event of the intentional release of smallpox. In our letter to the CDC we requested permission to expand our vaccination program to additional numbers of these groups, as well as to offer vaccine to traditional first responders.

We are working with other professionals including the Coroner's office and Los Angeles World Airport and Los Angeles Port Quarantine offices to identify additional volunteers who should be vaccinated.

We are sending additional correspondence to hospitals indicating a final March 15th deadline for submission of requests for vaccination of staff to better estimate how much vaccine we may be able to offer to other groups pending CDC approval.

We anticipate returning to you with an update on the status of the vaccination program in 30 days. In the meantime, if you have any questions or need additional information please let either of us know.

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c: Chief Administrative Officer
County Counsel
Executive Officer, Board of Supervisors